Docket No. ____

DECLARATION FOR U.S. PATENT APPLICATION

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled

TEMPERATURE COMPENSATED OSCILLATOR

the specificatio	n of which is attached hereto ur	nless the following is chec	cked		
	nas United States Applica pplication Number <u>PCT/JP03/</u>				
	hat I have reviewed and underst ended by any amendment refer		pove-identified specification,	including the	
I acknowledge Regulations, §	the duty to disclose information 1.56.	which is material to pate	entability as defined in Title	37, Code of Federal	
for patent or in	foreign priority benefits under I ventor's certificate listed below ficate having a filing date befor	and have also identified	below any foreign applicatio	n for patent or	
				Priority Claimed	
(List prior foreign applications. See note A)	2002-11998	JAPAN	21/January/2002	⊠ Yes □ No	
	(Number)	(Country)	(Day/Month/Year Filed)		
	(Number)	(Country)	(Day/Month/Year Filed)	Yes No	
				☐ Yes ☐ No	
	(Number)	(Country)	(Day/Month/Year Filed)		
				□ Yes □ No	
	(Number)	(Country)	(Day/Month/Year Filed)		
(See note B)	See attached list for additional	prior foreign application	s		
in the manner in the manner in the manner	the benefit under Title 35, Unit ubject matter of each of the clai provided by the first paragraph lich is material to patentability a ecame available between the fil blication.	ms of this application is it of Title 35, United State as defined in Title 37, Co.	not disclosed in the prior Un s Code, § 112, I acknowledg de of Federal Regulations.	ited States application ge the duty to disclose	
Status					
(List prior U.S. Applications)	(Application Serial No.)	(Filing Date)	Patented Pending Abandoned		
	(Application Serial No.)	(Fining Date)			
	(Application Serial No.)	(Filing Date)	Patented Pend	ding Abandoned	
	(Application Serial No.)	(Filing Date)	Patented Pen	ding Abandoned	
	(Application Serial No.)	(Filing Date)	Patented Pene	ding Abandoned	
	(()			

I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

Customer Number: 38834

Please direct all communications to the following address:

Westerman, Hattori, Daniels & Adrian, LLP 1250 Connecticut Avenue, N.W., Suite 700, Washington, D.C. 20036

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Title 18 of the United States Code, § 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

(See note C)	Full name of sole or f Inventor's signature	irst inventor (given name, family name)	Date 19 / T. H. /2001/			
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	1-12, Tanashicho 6-chome, Nishitokyo-shi, Tokyo 188-8511, JAPAN					
	Full name of second inventor's signature	nventor (given name, family name)	Date			
	Residence		Citizenship			
	Post Office Address					
	Full name of third inv Inventor's signature	ventor (given name, family name)	Date			
	Residence		Citizenship			
	Post Office Address		- Cruzensinp			
	Tost Office Address					
	Full name of fourth in Inventor's signature	nventor (given name, family name)	Date			
	Residence		Citizenship			
	Post Office Address					
	Full name of fifth inventor (given name, family name)					
	Inventor's signature		Date			
	Residence		Citizenship			
	Post Office Address					
	Full name of sixth inv	ventor (given name, family name)				
	Inventor's signature		Date			
	Residence		Citizenship			
	Post Office Address					

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